

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET							SERIAL NO. <u>10804382</u>	FILING DATE	
							APPLICANT(S)		
CLAIMS									
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT				
	IND	DEP	IND	DEP	IND	DEP			
1	1		1				31		
2							32		
3							33		
4							34		
5							35		
6							36		
7							37		
8							38		
9							39		
10		2		2			40		
11		2		2			41		
12		2		2			42		
13	1		1				43		
14							44		
15							45		
16							46		
17							47		
18							48		
19		3		3			49		
20		2		2			50		
21		2		2					
22		2		2					
23		2		2					
24		2		2					
25		2		2					
26		1		1					
27		1		1					
28	1		1						
29									
30									
31									
32									
33									
34									
35									
36									
37									
38	1		1						
39									
40									
41									
42	1		1						
43		1		1					
44		1		1					
45		1		1					
46	1		1						
47									
48									
49									
50									
TOTAL IND.							TOTAL IND.		
TOTAL DEP.							TOTAL DEP.		
TOTAL CLAIMS							TOTAL CLAIMS		